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Fashion for a reason

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1 Fashion for a reason: Oral forms of jewellery to aid Forensic Dentistry

2 **Abstract:** Jewellery along with other personal effects have been used for human identification
 3 and acknowledged in the INTERPOL (The International Criminal Police Organization) DVI
 4 (disaster victim identification) forms. It is hypothesised that modified oral jewellery has scope
 5 haas a unique personal effect that can be used in combination with other identifiers. The main
 6 aim of this study was to investigate the opinions on the use of modified tooth/oral jewellery
 7 items among 90 subjects. The secondary aim was to create and suggest an elaborated oral
 8 charting system to document oral jewellery and tooth modifications and respective
 9 abbreviations. A number of 30 dental students, 30 dentists and 30 designers/tattoo & piercing
 10 artists (groups G1, G2 and G3) responded to online closed-ended online surveys (versions V1,
 11 V2 and V3). As results, G1 related-considered jewellery to 'fashion/contemporary' (77%), and
 12 47% considered it 'unique' unique and accepted the idea of wearing a customised oral
 13 jewellery (equally 47%). G2 considered oral jewellery as 'disgusting/vile fashion' (46.66%),
 14 unique (60%) and and 'unique to a person' (60%). 53% of dentists accepted the idea of
 15 presenting oral jewellery to their patients. G3 associated it to 'a sign of rebellion' (53.3%),
 16 unique (40%) and accepted the idea of making customised oral jewellery (50%), considering
 17 to be a 'unique mark' (40%). Preferable designs were tooth jewel (G1), implant with Hallmark
 18 (G2) and fixed tooth ring (G3). As conclusions, oral jewellery and piercings are considerably
 19 highly acceptable by the public-assessed dental students but the uniqueness of oral jewellery
 20 was more recognized by the dentists. Modified oral jewellery has been fairly accepted among
 21 all but the design varied. and can be distinctive by modification. A recording of those by the
 22 dentist could potentially aid in forensic dental identifications. Therefore, an elaborated oral
 23 charting system to document oral jewellery and tooth modifications and respective
 24 abbreviations were also suggested to grant a useful reason to this fashion.

25 **Keywords:** forensic dentistry; oral jewellery; tooth modification; dental chart; human
 26 identification.

27 **Introduction:** Forensic dentists are mainly trained frequently requested to assist in human
 28 identification, and age estimation, sex and ancestry determination. Human identification by
 29 dental means is performed by comparing ante-mortem (AM) and post-mortem (PM) dental
 30 records¹ in order to establish a positive identity; and sometimes DNA must be analysed from
 31 extracted from teeth; however, the comparison of dental records is not always possible
 32 because the AM dental records might be missing, inaccurate or very old. Moreover, there is
 33 a rising concern of people towards dental hygiene and Due to the improvement of oral
 34 hygiene, it is not rare to find blank dental records where there is with no dental work carried
 35 out/recorded. to compare to the PM findings in order to establish an a positive identity. On
 36 the one hand, jewellery has been assessed as an anthropological aspect of identity in different
 37 fields of archaeology and anthropology in order to retrieve information of the socio-economic
 38 status, religious affiliations, gender-sex, ethnicity². and sometimes the person itself. Tattoos,
 39 piercing, and scarification are also not unusual among adolescents and young adults³ in the
 40 current society. On the other hand, jewellery can be used for human identification because
 41 they might be the only intact objects left after an air crash or natural disaster⁴. is also very
 42 commonly found evidence at crime scene or in a disaster scenario. Nowadays, ornamental

piercing enjoys widespread popularity giving jewellery a more prominent position as evidence in identification process. For instance, information about jewellery is requested with other personal effects in the INTERPOL disaster victim identification (DVI) Post Mortem PM forms (pink) victim identification: unidentified human remains forms 300's form (section 310 is specified for watches and 335 for jewellery)⁵. In body description 400's form, sections 424, 432, 440, 444, 448 and 452 address distinctive features in the deceased especially ear-lobe piercing. On other hand Moreover, dental information 600's forms specify "jew" as an abbreviation of 'tooth jewellery' and "tam" as an abbreviation of 'tooth modification'⁶; in general, dentists are not familiar with types of oral jewellery and classifications of tooth modifications; therefore, an elaborated system to record oral jewellery is needed by dentists due to the great variety of piercing types and anatomical sites for insertion.

A number of case reports or review articles on immediate or long-term complications of ornamental oral piercing have been published but not a single one has reckoned on the significance of ornamental piercings in oral cavity oral forms of jewellery for human identification. The main aim of this study was to investigate the opinions on the use of modified tooth/oral jewellery items among dental students, dentists, designers/tattoo & piercing artists. The secondary aim was to create and suggest an elaborated oral charting system to document oral jewellery and tooth modifications and respective abbreviations.

Literature Review

Aesthetic Dentistry

Aesthetics in dentistry serves as a major reason for seeking dental treatment. Since the introduction of orthodontics to the most current visual perceptions of the facial aesthetics (botulinum toxin injection, lip fillers, etc)⁷. The dental appearance of a person is frequently used to evaluate the social status, the personal and intellectual characteristics and the employment prospects; it also can play a critical role in a person's self-image, self-esteem and oral and psychological health⁸. Moreover, people with highly aesthetic dentitions are more prone to value dental health⁹.

It is important to note that the facial aesthetic perception differs among individuals and is often affected by their own experiences, and the influence from society and culture¹⁰. Also, the amount of change can be so extreme that people would desire a body different from the conventional human body. Nowadays, oral jewellery is mainly used as a style statement and the psychological effects are not as important as the facial aesthetics.

Tooth modifications

Throughout the long history of mankind, healthy teeth have always represented a symbol of youth and health. Tooth modifications can also represent the passing of status from one phase of life to the next such as the change from adolescence to adulthood. Tooth modifications are forms of cultural expression¹¹ related to the rite of passage, religious ritual purposes¹² or performed entirely for aesthetic reasons¹³. Modifications include filling, notching, drilling, grooving, grinding, chipping, breaking, extracting, inlaying or cutting away the crown of the teeth (or just part of it), sharpening to a point, lacquering or staining, affixing

the crown with gems or precious metals¹⁴. ~~Teeth mutilation practices have been noticed in inhabitants of the developed and under developed world regions and similar rituals have been preserved until nowadays in form of personal statement or as a ritual.~~ Moreover, these dental modifications can also be a means to achieve self-identity¹² and, eventually, this physical change could be used for human identification.

Oral soft tissue modification

Perforation of the lower lip (or less often the upper) for insertion of a decorative plug or other ornament was once widespread among Africans, including the women of *Mursi*. Insertion of decorative objects through the nose, perforation of the septum or of one or both of the wings, or alae (or both procedures combined) is still common in India¹⁴. Gum tattooing or dying (black gums) is a popular practice among women in West African countries like such as Senegal as a sign of beauty¹⁵. ~~however, intra-oral tattoos are practised worldwide but are not very common;~~ Intra oral tattoos such as the inner lip inking is on the rise as a latest trend in body art with the lower labial mucosa being tattooed because of its uniqueness and it is not readily visible¹⁶. Amalgam tattoo which is an iatrogenic lesion, caused by accidental/traumatic entry of dental amalgam into the soft tissues¹⁷, is suggestive of a previous amalgam tooth filling that has been replaced. ~~By the end of the 20th century, piercing of the ears, tongue, nose, lips, and other parts of the head had become a social marker within some Western cultural groups.~~ Another pigmented oral lesion of exogenous origin is the graphite tattoo. It mainly results from accidental injury in which graphite from the tip of the pencil is inserted into the oral mucosa, but case reports are rare¹⁸.

Scope of Forensic Jewellery

~~The ability of gemstones and precious metals to withstand high temperatures and extreme impacts, as well as immersion in water, means they are sometimes the only intact objects left after an air crash or natural disaster. According to a survey carried out in 2016, 21% of the American adults have a tattoo and 49% have ear piercings as the most popular body modification. Also piercing is accepted at a much younger age whereas 84% of people believe that a person aged 18 to 21 should get have a tattoo without parental consent⁷. A single unidentified body can be examined for any unique marks by visual appearance or radiographically. For instance, full length radiographs are taken through body bags just to investigate unusual findings for future comparison with AM medical records. Jewellery has the potential to be compared with AM records in case of any specificity in design, location or material noted in the records.~~

Diamonds and gemstones are effective at collecting DNA and skin cells that can help identify their wearer⁴. Moreover, gemstones and precious metals have the ability to withstand high temperatures and extreme impacts⁴. Oral jewellery has the potential to assist as auxiliary evidence because it is personal and protected inside the oral cavity in different possible forms: cemented to the tooth (tooth rings and tattooed crowns), pierced in oral soft tissues (tongue or lip piercings) or even embedded in the bone or tooth (implants and pin/post). A studied showed that dental implants are used as an essential aid in forensic dental identification because of its ability to resist higher temperature even after incineration¹⁹. A suggested

anatomical chart especially designed for oral jewellery/piercing or tattoos and a system of hallmarking would contribute as additional AM information.

Effects of intraoral jewellery and piercings

According to the American Academy of Paediatric Dentistry (AAPD), oral jewellery may lead to increased plaque levels, gingival inflammation and/or recession, caries, diminished articulation, metal allergy pain, infection, scar formation, tooth fractures, metal hypersensitivity reactions, localized periodontal disease, speech impediment, Ludwig's angina, hepatitis, and nerve damage²⁰; however, there is a limited literature related to the effects. The scientific articles are mainly related to case reports with a low number of patients and two review articles. Findings show that the most commonly described oral consequences are damage to the teeth and periodontal alterations caused by tongue piercing²⁰⁻²². Tongue jewellery worn over a long period of time may result in the colonisation of perio-donto-pathogenic bacteria at the piercing site, especially if the subject does not carry out appropriate oral hygiene practices²¹.

Piercing types and anatomical location

Different forms of oral and perioral piercings can be placed almost everywhere in oral cavity as follows: lip piercings [Monroe (left side of upper lip), Madonna (right side of upper lip), medusa (centre of upper lip), labret piercing (single lower lip piercing at centre or off- centre), vertical labret (top of the lower lip to bottom of the lower lip), vertical low Bert (lower vestibular sulcus to jawline), horizontal lip (lower lip pierced horizontally), angel bite (contralateral piercings on upper lip), snake bite (contralateral piercings on lower lip), spider bite (unilateral lower lip dual piercing closed together), vampire bite (unilateral lower lip dual piercing separated by space), canine bite (quadrilateral upper and lower lip piercings in front of four canines), cyber bite (upper and lower lips pierced separately at centres)]; tongue piercings [classic (dorsoventral tongue piercing at centre or sides), venom piercing (the barbell is placed dorsally, curves down toward the ventral side of the tongue, and resurfaces at the dorsal aspect), web piercing (lingual fraenum piercing), horizontal tongue piercing (side to side piercing through body of the tongue), tip piercing (tip of the tongue), dimple piercing (unilateral or bilateral cheek piercing)]; uvula piercing; labial fraenum piercing and buccal fraenum piercing²³.

Hallmarking and tracking

A hallmark is a government seal that is stamped onto precious metal objects to certify their metal purity, such as jewellery or silverware. The purpose of a hallmark is to certify the metal purity of the item. Only a UK Government Assay Office can apply a hallmark. Testing precious metals for purity is called "assaying"¹². In the UK, all jewellery that have been made with gold, silver, platinum or palladium, must be hallmarked according to the Hallmarking Act 1973²⁴. The existing concept of personal identification from dental prostheses, either by surface marking or inclusion techniques, has been facilitating the identification of living people (cases of unconsciousness or loss of memory) or for forensic purposes²⁵. The denture markers should be biologically inert, inexpensive, easy to inscribe, possible to retrieve after an accident, and survive elevated temperatures. Although the frequency of edentulousness has

decreased in recent years due to the improvement in oral health, this concept is still useful²⁶; however, new ideas such as a hallmark of pin/post, a piercing with hallmarked jewellery could contribute to a wider possibility of markers to aid in forensic dental identification. An advantage of a hallmark of fixed posts or piercings is the permanence in the oral cavity whilst dentures can be easily lost or misplaced.

Methodology

School of Nursing and Health sciences and Dental Research Ethics Committee (SREC) of the University of Dundee, Scotland, UK has reviewed and approved the study under application number 2018005_Farrukh. The first part of this research was to investigate the opinions of three distinctive populations. The young generation (dental students), the qualified dentists and the artists who would design the oral jewellery. The sample size was comprised of an equal number of 30 dental students (group G1), 30 dentists (group G2) of the University of Dundee (Scotland, UK) and the University of Health sciences (Lahore, Pakistan) and 30 designers/tattoo & piercing artists (group G3) of the city of Dundee (UK).

The anonymous subjects were of minimum age of 18 years old ~~were~~, but sex and age were requested. Three closed-ended surveys (V1, V2 and V3) ~~were~~ created via google forms (© 2015 Google Inc.) and comprised of four questions (Q1 and Q2). Each version briefly explored opinions on different values of the oral jewellery /piercings as follows: V1 explored the cultural value; V2 explored the hygienic value and V3 explored the creational value. The first two questions were ~~similar to all~~ used for the three groups. Q1 explored an overall opinion about oral jewellery/piercing and Q2 explore the opinion about the uniqueness. ~~and the~~ The last two questions (Q3 and Q4) ~~were different~~ examined the opinions on designs (custom-made and type) specifically for each group as shown in table 1.

Table 1 – Description of questions and respective options in the surveys.

The nine different oral jewellery design proposed in question 4 were: removable tooth ring, fixed tooth ring, tattooed crown, tooth tattoo, invisibly engraved crown, hallmarked pin/post, implant with hallmark (all dental origin), tooth jewel (dental and body art origin) and piercing with hallmarked jewelery (body art origin). Data collected from all groups was analysed and compared using descriptive graphs. The second part of this research was to design an oral charting system to document oral jewellery and tooth modifications with respective abbreviations based on available literature.

Analysis of Results

Results for question 1, showed that 50 out of 90 (56%) pooled responses related oral jewellery/piercings to “Fashion/contemporary”, followed by 24% as “A sign of rebellion” and 20% as “disgusting/vile”. “Fashion/contemporary” was the first choice for G1 (77%), and G2 responded equally to “fashion/contemporary” and “disgusting/vile” (46.5%) whilst “A sign of rebellion” was popular for G3 (53%) as seen in figure 1. Female participants on average ~~were very clearly~~ related oral jewellery/piercings to “Fashion/contemporary” whereas male participants ~~had quite mixed opinion whether~~ considered oral jewellery ~~is as~~ “Fashion/contemporary” or “A sign of rebellion”. Results for question 2, showed that 47% of

G1 considered 'yes' to tooth jewellery/modification as a unique mark, 60% of G2 responded "maybe" and G3 responded equally to "Yes" and "maybe" (40% each).

Figure 1 - Relation of oral jewellery to given expressions, comparison amongst survey groups.

Considering question 3, Results for question 3 showed that overall 50% of the pooled participants considered the idea of wearing customised oral jewellery by choosing the "unusual but acceptable" option, followed by 36% of responses "interesting & strange" and 14% of responses of "never". G1 responded equally to "interesting & strange" and "unusual but acceptable" by 47% each whereas G2 considered "unusual but acceptable" by 53% as shown in figure 2.

Figure 2 - Group's opinions on wearing/presenting/making customised oral jewellery.

The suggestion of a customised oral jewellery requested in question 4 was widely accepted amongst all three groups. The favourite options ranged from "Tooth jewel" (43%), "Implant with hallmark" (38%) to "Invisibly engraved crown" (23%) of responses. The overall popularity of oral jewellery designs is shown in table 2.

Table 2 - Popularity of different jewellery designs amongst groups.

Discussion

The advancement of forensic field has moved from a time where dental prostheses were visually identified by the makers to the interpretation of AM dental records and comparison to the PM dental findings by the forensic dentist. Nowadays, dental identification assumes a primary role in the identification of human remains specially when PM body changes and traumatic tissue injury occurs. The INTERPOL DVI guideline acknowledges three primary identifiers as the most reliable means of identification: friction ridge analysis, comparative dental analysis and DNA analysis. Secondary identifiers include personal description, medical findings/ records as well as personal effects⁵. The search for any unique marks and particular details about a pace maker, hip replacement, spinal fusion, healed fracture, pinned or wire placement old shrapnel wounds or other unusual findings is in practice during human identification either for a single body or multiple ones. For instance, the only possibility that make these findings a reliable evidence for comparison against the PM findings is the availability of recorded AM records. For instance, a pace maker with a serial number encoded on itself can be used to trace the manufacturer, country and specific surgeon. Challenges can be found in the comparative dental analysis due to the improvements in oral care and associated reduction of restorations available for comparison concomitantly with the usual problem of poor or absent AM dental records²⁷; therefore dentists should appreciate and record the various anatomical traits (dental and non-dental)²⁸ and other features present in the oral cavity. Forensic dentists should explore new ways of establishing dental identity because the rising concern of people for perfect teeth and Hollywood smile reflects the decrease in the number of dental restorative work for future comparison. It is not impossible to find people with sound teeth or inexistent AM dental information and, in such situations, there is a need to rethink approaches to identify a victim by dental means.

Oral jewellery has the potential to assist as auxiliary evidence because it is personal, intimate to an individual and protected inside the oral cavity in different possible forms: (most of oral piercings and all of other designs), cemented to the tooth (tooth rings and tattooed crowns), worn in a piercing pierced in oral soft tissues (tongue or lip piercings) or even embeddedness embedded in the bone or tooth (implants and pin/post). and there is no chance of losing it or changing it that frequently as easy as other costume jewellery. Whereas other body or costume jewellery items are more easily changed, stolen, lost or being worn by another person and can mislead investigations. Moreover, gemstones and precious metals have the ability to withstand high temperatures and extreme impacts⁴. A studied showed that dental implants are used as an essential aid in forensic dental identification because of its ability to resist higher temperature even after incineration¹⁹. The concern of recording and the distinctiveness of the design could be resolved by introducing an A suggested anatomical chart especially designed for oral jewellery/piercing or tattoos and a system of hallmarking respectively would guide the dentist. The idea of hallmarking or giving a serial number to oral jewels/fashion prostheses came from one notorious case of a partially decomposed body that was pulled from the sea and was identified by the Rolex found on the wrist in 1996. High-end timepieces have serial numbers, allowing them to be traced even if they are damaged¹³.

Oral jewellery a major concern to dentists because of undeniable complications due to wrong piercing sites, piercing artist's lack of knowledge about anatomy and oral structure in function from the piercing artist end, unawareness of maintaining and poor patient's oral hygiene, and aftercare from patient/wearer side. In contrary, for wearer it's a way of personal statement that makes oral jewellery unique to a personality¹⁰⁻¹¹. Oral jewellery is basically an amalgam of body modification and jewellery, where Jewellery has extensive personal, cultural and religious associations with identity back from ancient times it's considered to be as very unique and personal to a tribe, nation or even to an individual and modifications have generally been used to mark the social position of an individual in a manner visible to and recognized by other members of the society for reasons like ritual and aesthetics⁵. This was first mixed together in ancient Egypt as a symbol of royalty created in figure of dog in form of oral piercing in 1500BC.

Forensic oral jewellery is truly based on art and science nature of dentistry where author is joining art of body/dental modifications to the science of forensic dental identification. Over the years jewellery has multiplied until it included ornaments for every part of the body from teeth to toes. Same as jewellery now a days almost any part of the body may be pierced⁷. The most recent trend which is replacing "engagement rings" to "engagement piercing" is an indication that how people are evolving with time and how their needs are changing from wearable jewellery to ornamental piercings. Both men and women have more than 50 different types of piercings from which they can choose, and some piercings offer almost limitless placement options. Oral region is not an exception in booming trend of piercings almost 9.5% female Americans have tongue piercing that is 4th popular type of piercing in female and lip piercing is at 7th position with 4% of female population have it done. An estimated 16% of pierced American men have tongue piercings, making them the fourth most popular piercing type for men¹⁴.

According to the results, the three groups have different opinions on the uniqueness of oral jewellery and tooth modification. Dentists considered unique (60%) whilst not even half of the dental students and the tattoo artists are aware of the potential identificatory value. Analysis of the cultural value based on the dental students' opinions showed that 77% of the dental students accepted those oral modifications as contemporary but a designed piece of jewellery was not preferable (only 47% of sample). Tooth jewellery was the elected design, probably because of the visual appeal. Current studies on the impact of social media proved that young people often show narcissistic tendencies²⁹ but other reasons should be factored into this chosen option. Cultural values are the core principles of a community and the customs are part of it. In this respect, it is important to note that the dental students (and respective low number and locations) are representative of a fraction of the young generation. Moreover, the analysis of a behaviour that defines the way of life for a group is beyond the scope of this project.

The dentists might have expressed opinion on the hygienic value of oral jewellery and tooth modification when they suggested the implant with hallmark followed by hallmarked pin/post. An educated guess could be that dentists prefer internal marking to avoid more plaque retention on teeth or they are aware that the chamber of some implants have laser etched batch numbers³⁰. Oral jewellery is a major concern to dentists because oral accessories may lead to increased plaque levels, gingival inflammation and/or recession, caries, diminished articulation, and metal allergy²⁰. Similarly, a study proved that patients wearing orthodontic appliances presented changes in the status of the oral environment after bracket placement. More noticeable in the lingual appliance than the labial one³¹. Until now Up to date, no case control or longitudinal studies have been available in which have proved a clear correlation between oral piercings and long-term oral damage has been established³². Need was there to analyse the reason behind piercings and to find out how people react to new design so idea of shifting oral piercing and ornamentation under dental profession or regulating and educating currently present tattoo and piercing parlours can be carried out. It can be beneficial for people, to dentistry itself and mainly for forensic dentistry by not neglecting side effects and giving a reason to fashion. Unregulated piercing parlours and techniques have been identified by the National Institutes of Health as a possible vector for disease transmission (e.g., hepatitis, tetanus, tuberculosis) reason why these complications are encountering is and the reasons unknown whether it is might vary from an inadequate wrong piercing site, a faulty jewellery design or bad poor oral hygiene^{33,34}.

The creational value of tooth jewellery has not been appraised by the designers/tattoo & piercing artists. Only 53% of sample would suggest or create a specific design and the reasons have not been explored. The fixed tooth ring was selected as the most practical and durable one. As discussed before most of the designs are dental in origin with fashion modification the methods of application are not new to dental professionals. The way of hallmarking the jewellery has 100 years old history and that's not alien concept either. All suggested designs, method of applications and respective forensic value have been summarized in table 3.

Table 3 - Most and least popular oral jewellery designs in order and specific methods of application and forensic value

Recording modified dental jewellery

Based on the existing dental codes from Plassdata⁶ (primary code), the main author suggested secondary codes according to the type of oral jewellery or tooth modification as seen in table 4. An anatomical chart to record oral jewellery/piercings or tattoos is suggested in figure 3 (a & b). Finally, the types of dental modification found in literature were transformed in abbreviations for their record in dental charts as seen in table 5.

Table 4 - Modified abbreviations to record dental jewellery.

Recording oral piercings and tattoos

Among different types of dental charts, Anatomical charting system is most suitable to record soft tissue piercing as anatomical charts represent the anatomy of teeth and adjacent soft tissues¹⁸. In this case a detailed sketch/drawing of oral cavity will help to locate the piercing in a subject and just mark it down on the drawing as suggest in figure 3 (a & b).

Fig 3 (a) - Nomenclature for oral piercing sites/types and (b) - Anatomical chart to record oral jewellery/piercings or tattoos.

Recording other dental modification

According to documented types of dental modification found in literature following abbreviations can be used to record in dental charts as seen in table 5.

Table 5 - Suggested abbreviations to record dental modifications.

Limitations

Literature available on oral jewellery is almost non-existing, pro's and con's of latest fashion trends involving such a functional place like oral cavity must be studied. The exact number of British people with oral piercings, tattoos or other modifications is unknown at present. Longitudinal studies are required to explore long term effects of oral piercings especially tongue piercing. General dentists should be trained at undergraduate level to be familiar with different kind of piercings and modifications along with special emphasis to use suggestive anatomical charts to mark unique findings.

Conclusion

The concept of modified oral jewellery/piercings has been accepted by all three groups where people are willing to wear/present or make customised oral jewellery. It is not merely a unique mark, a fashion or personal statement to an individual, but of particular importance as the only representation left for families of the deceased if there are no physical remains for them to bury (in DVI). With the booming trend of ornamental oral piercings at the right time when forensic odontologists have the responsibility to flourish forensic dentistry and are in quest of an innovative approach to establish identity where traditional dental comparison fails, modified oral jewellery/piercings could stand out by receiving a reason and not only as a fashion. Suggested abbreviations to record oral jewellery, dental modifications and suggested anatomical charts to record oral ornamental piercings/tattoos can be utilised in

general dentistry (AM) and forensic dentistry (PM) as a combined effort to spot every exceptional finding that can be used as evidence.

As conclusions, oral jewellery and piercings are highly acceptable by the dental students but the uniqueness of oral jewellery was more recognized by the dentists. Modified oral jewellery has been fairly accepted among all but the design varied. A recording of those by the dentist could potentially aid in forensic dental identifications. General dentists should be trained at undergraduate level to be familiar with different kind of piercings and modifications. Therefore, an elaborated oral charting system to document oral jewellery and tooth modifications and respective abbreviations were also suggested to grant a useful reason to this fashion.

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